PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10783789

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN	
						ımn 2)	:	TYPE [OF.		ENTITY
TOTAL CLAIMS			29		:	·		RATE	FEE	7	RATE	FEE
F	DR .		NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			24 minus 20=		. 4			X\$.9=	1	OR	X\$18=	79:00
INI	DEPENDENT C	LAIMS	3 minus 3 =		. 6			X43=		OR	X86=	
М	JLTIPLE DEPEI	NDENT CLAIM P	RESENT				٠	+145=		OR	-290=	
* If the difference in column 1 is less than zero.					"0" in (column 2		TOTAL		OR	TOTAL	842
CLAIMS AS AMENDED - PART II								OTHER THAN				
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		XS 9=		OR	X\$18=	
	Independent	*	Minus	***	· 	=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DE	PENDENT	CLAIM			+145=		OR	+290=	
						•		TOTAL	}	-{ '	TOTAL	
									<u> </u>	OR	ADDIT. FEE	
,	<u> </u>	(Column 1)	T	(Colum		(Column 3)			,			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
	Incependent	NITATION: OF AU	Minus	***	CLAINA	=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	DETIPLE DE	PENDENT	CLAIM			+145=	,	OR	+290=	
							L.	TOTAL ODIT FEE		OR	TOTAL ADDIT: FEE	
		(Column 1)		(Colum	n 2)	(Column 3)	•		•			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	:
	Independent	*	Minus	***			f	X43=		i t	X86=	
٩	FIRST PRESE	NTATION OF ML	ILTIPLE DEI	PENDENT	CLAIM		\perp	740-		OR	7,00-	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=	
 1	f the "Highest Nur	nn 1 is less than thi nber Previously Pa mber Previously Pa	id For IN THI	S SPACE is	less than	20, enter "20."	Ą	TOTAL DDIT. FEE		OR A	TOTAL ODIT. FEE	
		ber Previously Paid					form	nd in the ann	ropriate box	c in cole	ımn 1	